

MITCHELL MANOR

5301 W LINCOLN AVE

WEST ALLIS 53219 Phone:(414) 615-7200

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 74

Total Licensed Bed Capacity (12/31/04): 74

Number of Residents on 12/31/04: 67

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Limited Liability Company

Skilled

Yes

Yes

Yes

70

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		40.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		43.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		16.4
Day Services	No	Mental Illness (Org./Psy)	52.2	65 - 74	0.0			-----
Respite Care	No	Mental Illness (Other)	11.9	75 - 84	38.8			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	52.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	16.4	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	7.5		-----	RNs		7.1
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		18.7
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	10.4	Male	20.9	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	79.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	2	6.9	147	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.0	
Skilled Care	6	100.0	337	24	82.8	125	0	0.0	0	23	100.0	191	9	100.0	123	0	0.0	0	62	92.5	
Intermediate	---	---	---	3	10.3	104	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.5	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	6	100.0		29	100.0		0	0.0		23	100.0		9	100.0		0	0.0		67	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	1.2	Bathing	0.0	77.6	22.4	67
Other Nursing Homes	1.2	Dressing	4.5	71.6	23.9	67
Acute Care Hospitals	75.6	Transferring	17.9	58.2	23.9	67
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	11.9	58.2	29.9	67
Rehabilitation Hospitals	0.0	Eating	47.8	32.8	19.4	67
Other Locations	22.0	*****				
Total Number of Admissions	82	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.0		Receiving Respiratory Care	11.9
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	88.1		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	21.2	Occ/Freq. Incontinent of Bowel	65.7		Receiving Suctioning	0.0
Other Nursing Homes	4.7				Receiving Ostomy Care	3.0
Acute Care Hospitals	14.1	Mobility			Receiving Tube Feeding	1.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	52.2
Rehabilitation Hospitals	0.0					
Other Locations	22.4	Skin Care			Other Resident Characteristics	
Deaths	37.6	With Pressure Sores	7.5		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	1.5		Medications	
(Including Deaths)	85				Receiving Psychoactive Drugs	23.9

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.6	86.4	1.09	88.2	1.07	87.3	1.08	88.8	1.07
Current Residents from In-County	98.5	85.0	1.16	88.5	1.11	85.8	1.15	77.4	1.27
Admissions from In-County, Still Residing	32.9	18.1	1.82	21.6	1.52	20.1	1.64	19.4	1.70
Admissions/Average Daily Census	117.1	199.9	0.59	187.2	0.63	173.5	0.68	146.5	0.80
Discharges/Average Daily Census	121.4	201.1	0.60	182.1	0.67	174.4	0.70	148.0	0.82
Discharges To Private Residence/Average Daily Census	25.7	83.1	0.31	76.7	0.34	70.3	0.37	66.9	0.38
Residents Receiving Skilled Care	95.5	95.8	1.00	96.7	0.99	95.8	1.00	89.9	1.06
Residents Aged 65 and Older	100	84.4	1.19	89.4	1.12	90.7	1.10	87.9	1.14
Title 19 (Medicaid) Funded Residents	43.3	61.2	0.71	48.4	0.89	56.7	0.76	66.1	0.66
Private Pay Funded Residents	34.3	13.7	2.50	31.2	1.10	23.3	1.47	20.6	1.67
Developmentally Disabled Residents	0.0	1.2	0.00	0.2	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	64.2	30.0	2.14	34.7	1.85	32.5	1.97	33.6	1.91
General Medical Service Residents	10.4	23.2	0.45	23.5	0.44	24.0	0.43	21.1	0.50
Impaired ADL (Mean)	54.0	52.9	1.02	50.4	1.07	51.7	1.04	49.4	1.09
Psychological Problems	23.9	51.7	0.46	58.0	0.41	56.2	0.42	57.7	0.41
Nursing Care Required (Mean)	9.7	8.4	1.15	7.3	1.34	7.7	1.26	7.4	1.31